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CONFIRMATION NO. 4544

Bib Data Sheet

<b>* SERIAL NUMBER</b> 09/501,912	<b>FILING OR 371(c) DATE</b> 02/10/2000 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1644	<b>ATTORNEY DOCKET NO.</b> D6017CIP
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## APPLICANTS

Kimberly Kline, Austin, TX;  
 Bob G. Sanders, Austin, TX;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/112,874 07/09/1998 ABN  
 which claims benefit of 60/052,132 07/10/1997

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/21/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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## TITLE

TARGETED DESTRUCTION OF PESTS

<b>FILING FEE RECEIVED</b> 423	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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Bib Data Sheet

CONFIRMATION NO. 4544

SERIAL NUMBER 09/501,912	FILING DATE 02/10/2000  RULE	CLASS 435	GROUP ART UNIT 1644	ATTORNEY DOCKET NO. D6017CIP
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## APPLICANTS

Kimberly Kline, Austin, TX;

Bob G. Sanders, Austin, TX;

## \*\* CONTINUING DATA \*\*\*\*\*

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which claims benefit of 60/052,132 07/10/1997

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

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\*\* 04/21/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	TX	4	20	5
Allowance <i>Pat. No.</i> Examiner's Signature Initials				

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## TITLE

Targeted destruction of pests

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )



Bib Data Sheet


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<b>SERIAL NUMBER</b> 09/501,912	<b>FILING DATE</b> 02/10/2000 <b>RULE</b> —	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> D6017CIP	
<b>APPLICANTS</b> Kimberly Kline, Austin, TX ; Bob G. Sanders, Austin, TX ;					
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 09/112,874 07/09/1998 <i>ABN</i> WHICH CLAIMS BENEFIT OF 60/052,132 07/10/1997					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 04/21/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>PN</i> Verified and Acknowledged <i>PN</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> Benjamin Aaron Adler McGregor & Adler LLP 8011 Candle Lane Houston, TX 77071					
<b>TITLE</b> Targeted destruction of pests					
<b>FILING FEE RECEIVED</b> 423	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		